

40 12/16/10
12/16/10

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	932 907	12-15-00 4-10-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>		

INDEX OF CLAIMS

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Rejected
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Allowed
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Canceled
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Restricted
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Non-elected
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Interference
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Appeal
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Objected

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Claim	Date			
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Claim	Date			
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If more than 150 claims or 10 actions
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